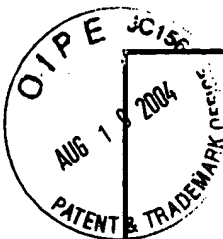


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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Attorney Docket No.	3000/22
Application Number	10/664,806
Filing Date	SEPTEMBER 17, 2003
First Named Inventor	TIMOTHY K. SEARFOSS
Group Art Unit	3612
Examiner	H. GUTMAN

ENCLOSURES (check all that apply)

<input type="checkbox"/> Amendment	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawings:	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Post Card Receipt
<input type="checkbox"/> Extension of Time Request (duplic)	<input type="checkbox"/> Change of Correspondence	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input checked="" type="checkbox"/> Supplemental Declaration	<input type="checkbox"/>
<input type="checkbox"/> Information Disclosure Statement, PTO- 1449, art	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	
	<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. <u>50-1713</u> . A duplicate copy of this sheet is enclosed.	

CALCULATION OF FEE

				Small Entity		Large Entity		
	Claims After Amendment		Highest No. Previously Paid For	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus		x \$9=	0		x \$18=	
Indep.		Minus		x \$43=	0		x \$86=	
First Presentation of Multiple Dep. Claim				+ \$145=	---		+ \$290=	
				total add'l fee	\$ 0		total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 Cardinal Law Group 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature		Date:	AUGUST 16, 2004

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22202-1450 on this date:		AUGUST 16, 2004
Signature	 FRANK C. NICHOLAS (33,983)	Date: AUGUST 16, 2004

Case No. 3000/22**DECLARATION FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled TRAILER COVER SYSTEM, the specification of which:

- ☐ is attached hereto.
☒ was filed on September 17, 2003 as Application Serial No. 10/664,806.
☐ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)Priority Claimed

<input type="checkbox"/>	<input type="checkbox"/>
Yes	No

(Number)

(Country)

(Day/Month/Year Filed)

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

(Application Serial No.)

(Filing Date)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

(Application Serial No.)

(Filing Date)

(Status-patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor's Signature

Full name of sole or first inventor

Residence

Citizenship

Post Office Address

TIMOTHY K. SEARFOSSALGER, MICHIGAN 48610US.2574 SCHOOL ROAD, ALGER, MICHIGAN 48610

Date:

8-13-04

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